

DOCUMENT RESUME

ED 392 752

SP 036 488

AUTHOR Rodriguez, Monica; And Others
TITLE Teaching Our Teachers To Teach: A SIECUS Study On Training and Preparation for HIV/AIDS Prevention and Sexuality Education.
INSTITUTION Sexuality Information and Educational Council of the United States, New York, NY.
SPONS AGENCY Centers for Disease Control (DHHS), Atlanta, GA. Div. of Adolescent and School Health.
PUB DATE 95
CONTRACT U-87/CCU-210194
NOTE 12p.
AVAILABLE FROM SIECUS, 130 West 42nd Street, Suite 350, New York, NY 10036.
PUB TYPE Reports - Research/Technical (143) -- Journal Articles (080)
JOURNAL CIT SIECUS Report; v28 n2 Dec 1995-Jan 1996 reprint
EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Acquired Immune Deficiency Syndrome; Course Content; Education Courses; Elementary School Teachers; Elementary Secondary Education; *Health Education; Health Promotion; Higher Education; Knowledge Base for Teaching; *Preservice Teacher Education; Prevention; Program Improvement; *Required Courses; Schools of Education; Secondary School Teachers; *Sex Education; Teacher Certification; *Teacher Education Curriculum

ABSTRACT

This study looked at whether teacher education programs at 169 institutions offered courses designed to prepare preservice teachers to teach health education, sex education, and Human Immunodeficiency Virus/Acquired Immune Deficiency System (HIV/AIDS) prevention education. Using course catalogs to allow for a systematic comparison of programs, researchers abstracted 819 courses in teacher education, health education, physical education, psychology, sociology, biology, religion, women's studies, human development and family studies, and home economics. Analysis of the study data suggested that elementary and secondary school teachers are not adequately prepared at the preservice level to provide HIV/AIDS prevention and sexuality education to students. Key findings included: (1) only 14 percent of the colleges and universities require a health education course for all preservice teachers, and no schools require a sex education course for all preservice teachers; (2) almost no elementary, secondary, or physical education certification programs require any courses on sexuality; (3) only 61 percent of the institutions require students in health education certification programs to take sexuality courses; (4) no schools require students in health education certification programs to take a course covering HIV/AIDS; (5) only 3 percent of physical education certification programs--and no elementary or secondary education certification programs--require sex education methodology courses; and (6) only 12 percent of schools offer any courses that mention HIV/AIDS in the course. Recommendations based on the findings include augmenting the number of sexuality and HIV/AIDS courses offered; improving course requirements for health, sexuality, and HIV/AIDS prevention education; expanding the scope of courses; and enriching teacher certification requirements. (Contains 18 references.) (ND)

TEACHING OUR TEACHERS TO TEACH

A SIECUS STUDY ON TRAINING AND PREPARATION FOR HIV/AIDS PREVENTION AND SEXUALITY EDUCATION

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)

- ☐ This document has been reproduced as received from the person or organization originating it.
- ☐ Minor changes have been made to improve reproduction quality.

- Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

PERMISSION TO REPRODUCE THIS
MATERIAL HAS BEEN GRANTED BY

M. Rodriguez
#

TO THE EDUCATIONAL RESOURCES
INFORMATION CENTER (ERIC)

SIECUS

SEXUALITY INFORMATION AND EDUCATION COUNCIL OF THE UNITED STATES

TEACHING OUR TEACHERS TO TEACH: A SIECUS STUDY ON TRAINING AND PREPARATION FOR HIV/AIDS PREVENTION AND SEXUALITY EDUCATION

Monica Rodriguez

SIECUS School Health Coordinator

Rebecca Young, M.A.

Division of Sociomedical Sciences, Columbia University,
New York City

Stacie Renfro

SIECUS Program Assistant, School Health Project

Marysol Asencio, Dr. P.H.

Assistant Professor, Division of Sociomedical Sciences,
Columbia University, New York City

Debra W. Haffner, M.P.H.

SIECUS President

The teaching of comprehensive sexuality education from kindergarten through 12th grade begins with the proper training of the teachers. Too often, they do not have the skills, knowledge, or inclination to teach such courses. Few have received training in sexuality education, and even fewer have received certification as sexuality educators.

Colleges and universities need to provide training in HIV/AIDS prevention and sexuality education for pre-service teachers, and must ensure that this training is comprehensive. To assess such efforts, SIECUS developed this study of undergraduate teacher preparation programs and their ability to provide sexuality education based on the six key concepts outlined in its *Guidelines for Comprehensive Sexuality Education: Kindergarten — 12th Grade*. These concepts are human development, relationships, personal skills, sexual behavior, sexual health, and society and culture.¹

Specifically, this report reviews the amount and type of sexuality education at a sample of 169 institutions offering undergraduate preparation of teachers. It is based on a review of course catalogs to allow for a systematic comparison of a sample of programs using the same criteria. (This method of studying catalogs rather than professionals was previously used by Bensley and Pope in 1994.²)

The study addresses three questions:

- Do teacher certification programs offer courses designed to prepare pre-service teachers to teach health education, sexuality education, and HIV/AIDS prevention education?
- Are courses required or elective?

- Are sexuality education programs comprehensive?

Just a few short years ago, there was little consensus about which topics and messages constitute comprehensive sexuality education. In 1990, SIECUS convened the National Guidelines Task Force to develop the *Guidelines for Comprehensive Sexuality Education: Kindergarten — 12th Grade* to provide an organizational framework. These *Guidelines* reflect a comprehensive approach to sexuality education, and are used to create new programs and improve existing ones at both the state and local levels. They are also used by teachers in providing a theoretical basis for classes and by others working in the areas of teacher preparation and in-service education.

SIECUS believes comprehensive sexuality education is an important component of every grade in all schools and that specially trained teachers can complement the education provided by families as well as by religious and community groups. SIECUS recommends careful development of school-based education programs to respect the diversity of values and beliefs represented in the community.

SIECUS also believes that curricula and resources should be appropriate to the age and developmental level of students. Teachers responsible for sexuality education must receive specialized training in human sexuality, including the philosophy and methodology of teaching sexuality education. Because sexuality issues touch on so many developmental issues relating to children and youth, SIECUS has, since 1965, urged that all prekindergarten through 12th grade pre-service teachers receive at least one course in human sexuality.

Editor's Note: This report was made possible by grant number U 87-CCU 210194 from the U.S. Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health. Its contents are the sole responsibility of the authors and do not represent the official views of the U.S. Centers for Disease Control and Prevention.

KEY FINDINGS OF NEW SIECUS STUDY

Teaching Our Teachers to Teach: A SIECUS Study on Training and Preparation for HIV/AIDS Prevention and Sexuality Education reveals that the nation's elementary and secondary school teachers are not adequately prepared at the pre-service level to provide HIV/AIDS prevention and sexuality education to students.

Key findings of this sample survey of 169 colleges and universities which provide undergraduate training of teachers include:

- 94 percent of schools offer at least one sexuality course, and 87 percent offer at least one health education course.
- Only 14 percent of the colleges and universities require a health education course for all pre-service teachers.
- No schools require a sexuality education course for all pre-service teachers.
- Almost no elementary (2 percent), secondary (1 percent), or physical education (6 percent) certification programs require any courses on sexuality.
- Only 61 percent of the institutions require students in health education certification programs to take sexuality courses.
- No schools require students in health education certification programs to take a course covering HIV/AIDS.
- Only 9 percent of health education certification programs required a sexuality education methodology course.
- Only 3 percent of physical education certification programs — and no elementary or secondary education certification programs — require sexuality education methodology courses.
- Only 12 percent of schools offered any courses that mentioned HIV/AIDS in the course descriptions.
- Not one school required a course that mentioned HIV/AIDS in their course descriptions for all pre-service teachers.

BACKGROUND

Concern about teacher training for sexuality education dates back to the beginning of the century. As early as 1912, the National Education Association called for programs to prepare teachers for sexuality education. In 1955, the National Association of Secondary School Principals reported that there seemed to be a trend toward increased number of courses for the preparation of sexuality educators. In 1968, the permanent Joint Committee of the National School Boards Association and the American Association of School Administrators said that the implementation of sexuality education programs in the schools "places a responsibility on local school boards and state departments of education and teacher training institutions to provide qualified teachers."¹ Organizations such as SIECUS have long called for improved teacher training in sexuality education.

The vast majority of those who teach sexuality education are not sexuality educators. In fact, physical education teachers account for the largest number of those providing sexuality education in middle and high schools — followed by health educators, biology teachers, home economics teachers, and school nurses.⁴ Classroom teachers are most likely those who provide health-related instruction in elementary school.⁵

Although over three-quarters of those teaching sexuality education classes report some undergraduate training in this area, there has been no study of the content of their training.⁶ A survey of 156 inner-city elementary teachers showed that

only 19 percent report any pre-service training in health education. Only one had received training within five years.⁷

In most studies, teachers report they do not feel adequately trained to teach HIV/AIDS prevention and sexuality education. They report concern about their ability to teach personal skills,⁸ about their knowledge of HIV/AIDS (particularly as it relates to having a child with AIDS in the classroom),⁹ or their knowledge of STDs.¹⁰ They also feel they need help in teaching such subjects as sexual orientation and risk behaviors that include drug use and safer sex practices.¹¹ Most of those teaching HIV/AIDS prevention and sexuality education have received their training in short workshops or seminars.¹²

Few states have either training or certification requirements for teachers who offer sexuality or HIV/AIDS prevention lessons. Although the vast majority require or recommend teaching about sexuality or HIV/AIDS, only 12 states, the District of Columbia, and Puerto Rico require any certification for teachers of sexuality education, and only 12 states and the District of Columbia require certification for teachers of HIV/AIDS prevention education. Only six states and Puerto Rico require teacher training for sexuality educators; nine states, the District of Columbia, and Puerto Rico require training for teachers of HIV/AIDS prevention education.¹³

If HIV/AIDS prevention and sexuality education programs are to prove effective, teachers must receive professional training in how to teach these subjects. The best way to train teachers initially in this area is through pre-service

training. Given the large numbers of teachers with undergraduate training who teach sexuality and health education, undergraduate teacher training programs need to be evaluated for their existing curricula on comprehensive sexuality education. This pre-service professional training will become the foundation upon which to base effective HIV/AIDS prevention and sexuality education curricula in schools.

METHODOLOGY

Problem

This study addresses three questions about pre-service teacher preparation: (1) Do teacher certification programs offer courses designed to prepare pre-service teachers to teach health education, sexuality education, and HIV/AIDS prevention education? (2) Are such courses required or elective? (3) Are sexuality education programs comprehensive?

Sample

SIECUS selected the 1994 *Membership Directory* of the American Association of Colleges for Teacher Education (AACTE) as its sample source. The organization's 700-plus member institutions comprise a broad cross-section of those preparing teachers across the United States and account for more than 85 percent of all new teachers entering the profession each year in the United States. Members range from very small religious colleges to large state universities located in all 50 states, the District of Columbia, the Virgin Islands, Puerto Rico, and Guam.

SIECUS used a two-stage, systematic sampling strategy to select institutions for this study. First, researchers selected every fourth institution in the *Membership Directory*. Next, they selected the first institution in each state listing (or the next one if the first was already selected). Four states and territories had only one school listed and therefore contributed no new institutions to the sample in the second stage. This sample selection process resulted in 231 institutions selected for the study.

SIECUS requested undergraduate course catalogs from the 231 institutions. Six were eliminated as ineligible because they did not offer undergraduate teacher training. From the remaining 225, a total of 169 usable catalogs were received. An additional 28 institutions replied, but they did not provide sufficient information about courses for inclusion in the survey. In general, these schools only sent letters. There was no response from the remaining 28 schools. The final response rate for complete, eligible surveys was 75 percent. All catalogs covered the 1993, 1994, or 1995 school years.

The final analysis is, therefore, based on a sample of 169 institutions offering undergraduate teacher preparation in the United States that appear representative of AACTE member institutions.

Criteria for Including Courses

Based on the title and description, courses were selected if they were:

- Available to students pursuing undergraduate teacher preparation (required, recommended, and elective courses), and
- The main focus of the course could be classified as either *health education* or *human sexuality*,
or
- The main focus of the course was a sexuality-related key concept delineated by the *Guidelines for Comprehensive Sexuality Education: Kindergarten—12th Grade*.

Researchers abstracted 819 courses offered by the following departments: teacher education, health education, physical education, psychology, sociology, biology, religion, women's studies, human development and family studies, and home economics. All courses were chosen because they had the potential to discuss sexuality issues based on course titles and descriptions. The sample includes both general issue and methodology courses. Health education courses with a broad focus were abstracted and were classified as health education courses ($n=434$). Health courses with a very specific focus which was not sexuality-related (such as nutrition or first aid) were not included in the sample. Those that specifically mentioned one or more key concepts as a focus of the course were classified as human sexuality courses ($n=385$). (See Table 1.)

TABLE 1: FOCUS OF COURSE BY NUMBER OF COURSES OFFERED AND REQUIRED

Focus of course	Number of courses offered at all schools	Percent of courses required for at least one certification program
General health education	434	81% ($n=350$)
Human sexuality	385	16% ($n=60$)
HIV/AIDS issues	24	33% ($n=8$)

Survey Instrument

Using the *Guidelines for Comprehensive Sexuality Education: Kindergarten—12th Grade*, SIECUS staff developed a survey instrument to obtain information from the catalogs. This instrument gathered information on course content as well as general institutional characteristics such as type of institution, location, student population, and teacher certification programs offered. Two general course categories were selected: health education and sexuality, since they were most likely to include sexuality-related components.¹⁴

Content Analysis

Each program was reviewed in two ways to determine if it included the six key concepts and topics identified in the *Guidelines*. First, the number of key concepts listed in the

course description was totaled and then used to determine the degree of comprehensiveness of any single sexuality-related course. Second, the number of different concepts presented across all of the school's abstracted courses was added. This number was interpreted as the comprehensiveness of the institution's entire sexuality education curriculum for teachers.

Course titles were also analyzed to gauge the overall focus of the course and to provide a second method for evaluating the sexuality education that teachers in training are offered. Since this content analysis is not as dependent on the level of detail in the catalogs, it provides some validation of the findings based on course descriptions.

Data Analysis

The abstracted surveys were coded, scanned (using the Teleform 3.1 program), and entered into SPSS-PC+ (a social science statistical computer package) for analysis. Course titles were also analyzed qualitatively, using content analysis techniques for grouping themes and key words.

Limitations

The use of catalogs to evaluate teacher training programs has limitations. The information abstracted for each course is based solely on the description listed in the catalog. It may not include all of the topics covered in a specific course and does not include a syllabus, underlying philosophy or orientation, required readings, instructor background, and instructor emphasis. SIECUS did not have data available on how many students actually take these courses, or how well they perform when they do take them.

Because this analysis is based solely on information abstracted from course descriptions and titles in institutional catalogs, the content analysis inevitably reflects the level of detail in the catalog as well as the breadth of the courses reviewed. Some courses may actually cover more of the key concepts than appear in their descriptions. Others may be listed but not offered during every academic year. Required courses are more likely available annually while elective courses are often taught on a rotating basis. Some schools list courses even though they are taught only every two to three years.

Thus, while the analysis is probably a conservative estimate of the comprehensiveness of sexuality education in undergraduate training, the overall analysis probably *overstates* the number of available sexuality-related courses.

RESULTS

Institutional Characteristics

This sample of 169 colleges and universities that prepare pre-service teachers is composed of 52 percent public, 5 percent private secular, and 43 percent private religious colleges and universities in the United States. Half (50 percent) had student populations of 3,000 or less, 7 percent had a student population greater than 15,000.

Almost all the colleges and universities offering teacher preparation programs offer certification in elementary (98 percent) and secondary education (98 percent). Many also offer certification in physical education (64 percent), health education (41 percent) and joint physical/health education (12 percent). Only 2 percent offer family life education certification programs. These are offered through their home economics departments. None of the required course descriptions in the family life education certification programs explicitly mention topics related to sexual health, sexual behavior, or personal skills. In addition, 6 percent of the institutions offer other teaching certification programs that have some sexuality or HIV/AIDS course requirements. The other majors represented in this category are home economics, special education, and child development and family studies. (See Table 2.)

TABLE 2: PERCENTAGE OF SCHOOLS OFFERING CERTIFICATION BY CERTIFICATION PROGRAM (N=169)

Certification program	Percentage of schools offering certification
Elementary education	98% (n=166)
Secondary education	98% (n=165)
Physical education	64% (n=108)
Health education	41% (n=69)
Health and Physical education combined	12% (n=20)
Family life education	2% (n=3)
Other teacher certification programs*	6% (n=10)

*These certification programs contain some sexuality education coursework. The certification programs represented are home economics, special education, and child development programs.

Courses in Health, Sexuality, and HIV/AIDS

Almost all of the institutions offer at least one class to pre-service teachers in general health education (87 percent) or human sexuality (94 percent). Most, however, do not offer classes that cover HIV/AIDS (only 12 percent offer courses that mention HIV/AIDS in their course descriptions). (See Table 3.) Only 9 percent of the general health education course descriptions contain specific language related to sex-

TABLE 3: FOCUS OF COURSE BY PERCENTAGE OF SCHOOLS OFFERING OR REQUIRING COURSEWORK (N=169)

Focus of course	Percent of schools offering at least one course	Percent of schools requiring at least one course for at least one certification program	Percent of schools requiring at least one course for all certification programs
General health education*	87% (n=147)	79% (n=133)	14% (n=23)
Human sexuality	94% (n=159)	33% (n=56)	0
HIV/AIDS issues	12% (n=21)	4% (n=7)	0

*These figures exclude courses in first aid, nutrition, and other specific topics not directly relevant to human sexuality.

uality or HIV/AIDS. In general, sexuality is mentioned as one topic among others such as mental health, stress reduction, substance abuse, disease prevention, or nutrition.

Many of the institutions offer several general health education courses (excluding first aid, nutrition, and other topics not directly relevant to human sexuality). 56 percent offer one to three courses, 24 percent, four to five courses, and 6 percent, six or more courses. Many also offer several sexuality courses: 74 percent offer one to three courses and 20 percent, four to five courses. One school offers seven courses. Only 11 percent of the schools offered one course covering HIV/AIDS. Three schools offered two courses. (See Table 4.)

TABLE 4: NUMBER OF COURSES OFFERED BY SCHOOLS IN THE AREAS OF HEALTH, SEXUALITY, AND HIV/AIDS (N=169)

Number of courses	General health education courses*	Sexuality courses	HIV/AIDS issues courses
0	13% (n=22)	6% (n=10)	88% (n=148)
1	22% (n=38)	30% (n=50)	11% (n=18)
2-3	34% (n=58)	44% (n=75)	2% (n=3)
4-5	24% (n=41)	20% (n=33)	0
6-9	6% (n=10)	1% (n=1)	0

*These figures exclude courses in first aid, nutrition, and other specific topics not directly relevant to human sexuality.

This study also looked at how many courses are designed to help pre-service teachers learn the pedagogy and methodology of health education, sexuality education, and HIV/AIDS prevention education. Most schools (72 percent) offer classes in health education methods. Few schools (12 percent), however, offer methods courses in sexuality education. Only 4 percent offer courses which include methods training in HIV/AIDS prevention education. (See Table 5.)

Course Requirements in Health, Sexuality, and HIV/AIDS

One way to measure whether pre-service teachers will

TABLE 5: PERCENTAGE OF SCHOOLS OFFERING AND REQUIRING TEACHING METHODS COURSES (N=169)

Focus of methods course	Percent of schools offering at least one course	Percent of schools requiring at least one methods course for at least one certification program	Percent of schools requiring at least one methods course for all certification programs
General health education methods	72% (n=121)	63% (n=106)	2% (n=3)
Sexuality education methods	12% (n=20)	8% (n=13)	0
HIV/AIDS prevention education methods	4% (n=6)	4% (n=6)	0

receive training in a certain area is to look at required courses. Most schools (79 percent) require at least one general health education course for at least one certification program, and many (33 percent) require at least one sexuality course for at least one certification program. (See Table 3.) Hardly any (4 percent) require courses covering HIV/AIDS for any programs. Of all abstracted courses, 81 percent of the health education courses, 16 percent of the sexuality courses, and 33 percent of the courses covering HIV/AIDS are required for at least one certification program. (See Table 1.)

Only 14 percent of the surveyed schools require a health education course for all pre-service teachers. (See Table 3.) None require courses covering HIV/AIDS or sexuality courses for all pre-service teachers, although one does recommend sexuality courses for all teacher certification programs.

Almost three-quarters (72 percent) of the schools offer courses in the pedagogy and methodology of health education for their pre-service teachers. Twelve percent of schools offer a course in the pedagogy and methodology of sexuality education. Only 4 percent of schools offer methodology courses which include HIV/AIDS prevention education for any teacher certification program.

Most schools in the sample (63 percent) require a course in health education teaching methods for at least one pre-service certification program. Only three (2 percent) require a methods course for all pre-service certification programs. Less than one in ten of the schools (8 percent) require sexuality education teaching methods courses for any certification program. Only 4 percent require teaching methods courses which specifically indicate HIV/AIDS prevention education content for any program. (See Table 5.)

Requirements for Certification Programs

There are few required courses in the areas of health education, human sexuality education, or HIV/AIDS prevention education for most certification programs. Although elementary classroom teachers almost always handle health education issues,¹⁵ less than half of the schools (48 percent) require a health education course for pre-service elementary teachers. Only 2 percent require a sexuality course, and only 3 percent require courses covering HIV/AIDS.

Figures indicate that secondary pre-service teachers (those without a specific specialization in health or physical education) are far less likely to receive pre-service training; only one in six schools (16 percent) require health education courses for pre-service secondary educators while only 1 percent require a sexuality course, and only 2 percent require a course covering HIV/AIDS. (See Table 6.)

Health and physical education teachers are most likely to provide sexuality education at the middle and high school level.¹⁶ Pre-service teachers enrolled in health and combined health and physical education certification programs are the most likely to be required to take courses in

TABLE 6: PERCENTAGE OF SCHOOLS REQUIRING SUBJECT BY CERTIFICATION PROGRAM

Certification program	Percent of schools requiring health education*	Percent of schools requiring human sexuality	Percent of schools requiring HIV/AIDS education
Elementary education (N=166)	48% (n=80)	2% (n=3)	3% (n=5)
Secondary education (N=165)	16% (n=27)	1% (n=1)	2% (n=3)
Health education (N=69)	86% (n=59)	61% (n=42)	0
Physical education (N=108)	57% (n=62)	6% (n=6)	1% (n=1)
Health and physical education combined (N=20)	100% (n=20)	30% (n=6)	5% (n=1)
Family life education (N=3)	2 schools	3 schools	0
Other teacher certification programs (N=10)	10% (n=1)	30% (n=3)	0

*These figures exclude courses in first aid, nutrition, and other specific topics not relevant to human sexuality.

health education and sexuality. However, requirements differ among degree programs. Eighty-six percent of schools require a general health education course for pre-service health educators* and 61 percent require a sexuality course. For pre-service teachers in combined health and physical education programs, all schools offering such programs require health education, and 30 percent require sexuality education. Fifty-seven percent of schools require a health education course for pre-service physical education teachers but only 6 percent require a sexuality course.

Surprisingly, in 1993-95, almost no schools required health or physical education pre-service teachers to take a course covering HIV/AIDS. No school requires a pre-service health education teacher to take a course covering HIV/AIDS. Only one school requires a pre-service physical education teacher to take a course covering HIV/AIDS, and one school requires pre-service teachers enrolled in combined health and physical education programs to take such a course. (See Table 6.) In fact, only 12 percent of schools offer any courses covering HIV/AIDS. (See Table 3.)

Methods courses are even less likely to be required. Although one-third (35 percent) of schools require pre-service elementary education students to take a health education methods course, none require a sexuality education

*SIECUS expected this figure would rise to 100 percent if health courses in nutrition, first aid, or other specific topics that include no sexuality information were included.

methods course, and only 2 percent require a course which includes HIV/AIDS prevention education methods. Pre-service secondary education students are even less likely to be required to take a health education methods course; only 4 percent of schools require them. No schools require sexuality education methods courses for pre-service secondary educators, and only 1 percent of schools require courses that include HIV/AIDS prevention education methods. (See Table 7.)

TABLE 7: PERCENTAGE OF SCHOOLS REQUIRING METHODS COURSES BY CERTIFICATION PROGRAM

Certification program	Require health education methods*	Require sexuality education methods	Require HIV/AIDS education methods
Elementary education (N=166)	35% (n=58)	0	2% (n=4)
Secondary education (N=165)	4% (n=6)	0	1% (n=2)
Health education (N=69)	77% (n=53)	9% (n=6)	0
Physical education (N=108)	30% (n=32)	3% (n=3)	1% (n=1)
Health and physical education combined (N=20)	85% (n=17)	20% (n=4)	5% (n=1)
Family life education (N=3)	0	100% (n=3)	0
Other teacher certification programs (N=10)	0	30% (n=3)	0

*These figures exclude courses in first aid, nutrition, and other specific topics not relevant to human sexuality.

Even those teachers most likely to teach health, sexuality, and HIV/AIDS prevention education are not always required to take methodology and pedagogy courses in HIV/AIDS prevention and sexuality education. Although 77 percent of schools require pre-service health educators to take a health education methods course, only 9 percent require a sexuality education methods course and none require a course that includes HIV/AIDS prevention education methods. Pre-service teachers in combined health and physical education programs are required to take health education methods courses in 85 percent of schools that offer such programs, but sexuality education methods courses are required in only 20 percent of schools, and courses including HIV/AIDS prevention education methods in only one school. Pre-service physical education teachers are required to take health education methods courses in 30 percent of schools, but only 3 percent of schools require a sexuality

education methods course, and only one requires a course which includes HIV/AIDS prevention education methods.

All three of the schools that offer a certification in family life education require a sexuality education methods course, but none require a health education methods course.

KEY CONCEPTS

A comprehensive sexuality education program covers human development, relationships, personal skills, sexual behavior, sexual health, and society and culture.¹⁷ The majority of courses (80 percent) offered to pre-service teachers list three or fewer of the key concepts. Human development, relationships, and society and culture are the most likely concepts included in course descriptions. Only 7 percent of schools list all six key concepts through some combination of courses offered; only four individual sexuality courses (1 percent) list all six key concepts in their course descriptions. In other words, pre-service teachers in 93 percent of the institutions will not receive coverage of the six key concepts even if they take every available course.

Of the courses offered to pre-service teachers:

- * 4 cover all 6 key concepts;
- * 33 cover 4 to 5 key concepts;
- * 106 cover 2 to 3 key concepts;
- * 143 cover 1 key concept;
- * 39 were not specific enough to determine.

Of the courses required for at least one pre-service certification program:

- * no courses cover all 6 key concepts;
- * 3 cover 5 key concepts;
- * 1 covers 4 key concepts;
- * 10 cover 3 key concepts;
- * 15 cover 2 key concepts;
- * 15 cover 1 key concept;
- * 16 were not specific enough to determine.

MAJOR FOCUS OF SEXUALITY COURSES

SIECUS also conducted a content analysis of course titles to supplement the course description analysis. While the course

description may indicate a range of topics, the title itself indicates the central focus of the course. (See Table 8.) In some cases, the title also indicates the disciplinary or philosophical perspective from which the course is taught.

There were six general title categories for human sexuality courses: "Sex, Sexual and Sexuality"; "Marriage, Family, and Relationships"; "Gender Sex Roles"; "Reproduction/Fertility"; "HIV/AIDS"; and "Others" (social problems/deviance, health, sexual assault or abuse, and gay and lesbian studies).

Sex, sexual, and sexuality (51 percent)

There were 179 courses with the words "sex," "sexual," or "sexuality" in the titles, excluding those within the other specified categories. The majority were simply titled "human sexuality" or other variations. An additional 16 courses included "family life education" in the title indicating a methods teaching perspective. Only one course included "sexually transmitted diseases" in its title. Most course titles did not clearly identify a disciplinary or philosophical perspective. Of those that did, the greatest number were psychological (18 courses), followed by methodological (14 courses), religious/moral (10 courses), and sociological (eight courses).

Marriage, family and relationships (34 percent)

There were 131 titles (34 percent) that indicated a focus on relationships. The vast majority had marriage and family in their titles. Other relationship-related terminology included "courtship," "dating," "love," and "mate selection." Again, most of the titles did not indicate a disciplinary or philosophical perspective. Of those that did, a sociological perspective was most common (18 courses), followed by religious/moral (four courses), psychological (two courses), and methods/teaching (two courses).

Gender/sex roles (7 percent)

There were 26 courses (7 percent) with "sex roles" and/or "gender" in their titles. The most common perspective was psychological (five courses), followed by philosophical (two courses) and sociological (two courses). One course each indicated a biological or religious perspective.

Reproduction/fertility (3 percent)

There were 12 courses (3 percent) with a human reproduction or fertility focus evident in the titles. There were only two specific perspectives mentioned — biological (three courses) and sociological (two courses). Only one course title ("Natural Family Planning") specifically mentioned contraception.

HIV/AIDS (2 percent)

There were nine courses (2 percent) with the words "HIV" and/or "AIDS" in the title. Of these, one course indicated a psychosocial perspective; none indicated a methods teaching perspective.

TABLE 8: FOCUS OF HUMAN SEXUALITY COURSES BY TITLES (N=385)	
Focus	Percentage of all human sexuality courses
Sex, sexual, and sexuality	51% (n=195)
Marriage, family, and relationships	34% (n=131)
Gender/sex roles	7% (n=26)
Reproduction/fertility	3% (n=12)
HIV/AIDS	2% (n=9)
Others*	3% (n=12)

*This category consists of courses falling into four categories: (1) social problems/deviance; (2) health; (3) sexual assault or abuse; and (4) gay and lesbian studies.

Others (3 percent)

The remaining 12 courses (3 percent) fell into four categories: (1) social problems/deviance, (2) health, (3) sexual assault or abuse, and (4) gay and lesbian studies. Five titles mentioned social problems or deviance with one from a religious perspective. There were four courses with health-related titles with only one indicating a methodological approach. Two titles mentioned sexual assault or abuse. One mentioned "lesbian/gay." This was the only course that indicated a focus on lesbian and gay issues or sexual orientation.

DISCUSSION AND CONCLUSIONS

The study's conclusions, while not surprising, show that there is still much work needed in the area of teacher preparation for HIV/AIDS prevention and sexuality education in the United States.

It is encouraging that almost all schools with teacher preparation programs offer at least one course in health education and sexuality issues. It is surprising, however, that few offer methodology courses and disappointing that only 12 percent of schools have a course description that even mentions HIV/AIDS.

The findings clearly illustrate that pre-service teachers are not adequately prepared to teach HIV/AIDS prevention and comprehensive sexuality education. Despite parental support and state-mandated demands for such education, those charged with this task do not have the proper tools to do so, leaving the responsibility to state and local departments of education and to the teachers themselves.

Specifically, only 14 percent of the surveyed institutions require health education courses for all of their pre-service teachers and none require a sexuality course. For health education certification programs, only 61 percent of schools require sexuality courses and none require courses covering HIV/AIDS. For elementary, secondary, or physical education certification, almost no institutions require sexuality courses (2 percent, 1 percent, and 6 percent, respectively) or courses covering HIV/AIDS (3 percent, 2 percent, and 1 percent respectively).

Pre-service health educators were most likely to be required to take pedagogy and methodology training in sexuality education. Even still, only a minority (9 percent) of health education certification programs required a sexuality education methodology course. Previous research indicates that teachers with undergraduate preparation in areas other than health education are the most likely to teach these topics.¹⁸ Yet, only 3 percent of physical education certification programs and no elementary or secondary education certification programs required sexuality education methods courses.

The number of programs that require, or even offer, training in HIV/AIDS is even lower than for sexuality education. Not one school required a course that mentioned

HIV/AIDS in their course descriptions for all pre-service teachers. Only 12 percent offer any courses that mentioned HIV/AIDS in their course descriptions. Even though most states have laws mandating HIV/AIDS prevention education in public schools, few colleges and universities provide their pre-service teachers with the skills they need to provide such education.

Most pre-service teachers have *elective* sexuality and health education courses available to them. Yet, they often have little time in their structured environment to take them. Even when they do have time, they will probably not find them comprehensive in scope but rather focusing on one or two sexuality-related themes such as relationships, society and culture, or sexual development. Of the sexuality courses offered at the surveyed institutions, only four (1 percent) were comprehensive in scope, covering all six key concepts. Teachers need broadly focused courses to help prepare them to teach such classes.

RECOMMENDATIONS

Augment the Number of Sexuality and HIV/AIDS Courses Offered. More colleges and universities must offer a complete course of study on human sexuality to pre-service teachers. They must also offer courses covering HIV/AIDS. In addition, they must offer courses on the methodology and pedagogy of HIV/AIDS prevention and sexuality education.

Improve Course Requirements for Health, Sexuality, and HIV/AIDS Prevention Education. At the very least, those who will teach sexuality education should receive training in human sexuality (including HIV/AIDS prevention) as well as the philosophy and teaching methods of sexuality education. Ideally, teachers should complete academic courses providing them with the most time-intensive and cognitively rich training.

Professional preparation programs for *all* teachers should include at least one health education survey course, and one human sexuality course which would include basic information about HIV/AIDS. In particular, all elementary, health, and physical education teachers, should be required to take courses on health education, and sexuality education, as well as methods courses in these areas.

Expand the Scope of Courses. Colleges and universities need to ensure that sexuality courses are comprehensive in scope. At a minimum, they should cover the six key concepts: human development, relationships, personal skills, sexual behavior, sexual health, and society and culture.

Enrich Teacher Certification Requirements. States should develop requirements that integrate sexuality education into existing health education certification requirements. Current requirements are not sufficient considering the vast number of professionals who are teaching sexuality

education. Current credential and accreditation bodies should integrate HIV/AIDS prevention education and sexuality education into their requirements for health educators.

CONCLUSION

Children must have access to comprehensive health education, including HIV/AIDS prevention and comprehensive sexuality education. Future generations of teachers must acquire the knowledge and skills to empower children to make healthy decisions. This study indicates there is an immediate need to improve teacher preparation in these critical areas in the United States.

REFERENCES

1. National Guidelines Task Force, *Guidelines for Comprehensive Sexuality Education: Kindergarten — 12th Grade* (New York: SIECUS, 1991).
2. L. B. Bensley and A. J. Pope, "A Study of Graduate Bulletins to Determine General Information and Graduate Requirements for Master's Degree Programs in Health Education," *Journal of Health Education*, 25.3 (1994): 165-71.
3. M. A. Carrera, "Training the Sex Educator: Guidelines for Teacher Training Institutions," *American Journal of Public Health*, 62.2 (1972): 233-41.
4. J. D. Forest and J. Silverman, "What Public School Teachers Teach about Preventing Pregnancy, AIDS and Sexually Transmitted Diseases," *Family Planning Perspectives*, 21.2 (1989): 65-72.
5. A. Hausman and S. Ruzek, "Implementation of Comprehensive School Health Education in Elementary Schools: Focus on Teacher Concerns," *Journal of School Health*, 65.3 (1995): 81-85.
6. Forest and Silverman, "What Public School Teachers Teach."
7. Hausman and Ruzek, "Implementation of Comprehensive School Education."
8. P. Levenson-Gingiss and R. Hamilton, "Teacher Perspectives After Implementing a Human Sexuality Education Program," *Journal of School Health*, 59.10 (1989): 427-31.
9. D. Ballard, D. White, and M. Glascoff, "AIDS/HIV Education for Pre-service Elementary School Teachers," *Journal of School Health*, 60.6 (1990): 262-5.
10. Levenson-Gingiss and Hamilton, "Teacher Perspectives."
11. D. Kerr, D. Allensworth, and J. Gayle, "The ASHA National HIV Education Needs Assessment of Health and Education Professionals," *Journal of School Health*, 59.7 (1989): 301-7.
12. Forest and Silverman, "What Public School Teachers Teach."
13. Sexuality Information and Education Council of the United States, *SIECUS Review of State Education Agency HIV/AIDS Prevention and Sexuality Education Programs* (New York: SIECUS, 1995).
14. Child and adolescent development courses were originally included in the abstraction process because of their potential to discuss sexual development. However, the content analysis for this category indicated that these courses dealt with general psychological and physical development without specific mention of sexuality. Consequently, the findings from this category are not relevant to this study and have been eliminated from the analysis.
15. Hausman and Ruzek, "Implementation of Comprehensive School Education."
16. Forest and Silverman, "What Public School Teachers Teach."
17. National Guidelines Task Force, *Guidelines for Comprehensive Sexuality Education*.
18. L. B. Bensley and A. J. Pope, "A Study of Graduate Bulletins to Determine General Information and Graduate Requirements for Master's Degree Programs in Health Education," *Journal of Health Education*, 25.3 (1994): 165-171; Forest and Silverman, "What Public School Teachers Teach"; D. Glascoff, "AIDS/HIV Education for Pre-Service Elementary School Teachers," *Journal of School Health*, 60.6 (1990): 262-265; Hausman and Ruzek, "Implementation of Comprehensive School Education"; P. Levenson-Gingiss and R. Hamilton, "Evaluation of Training Effects on Teacher Attitudes and Concerns Prior to Implementing a Human Sexuality Education Program," *Journal of School Health*, 59.4 (1989): 156-160.

M i s s i o n

SIECUS affirms that sexuality is a natural and healthy part of living. SIECUS develops, collects and disseminates information, promotes comprehensive education about sexuality, and advocates the right of individuals to make responsible sexual choices.



130 WEST 42ND STREET, SUITE 350, NEW YORK, NY 10036